

LOTHIAN NHS BOARD

Minutes of the meeting of Lothian NHS Board held at 9.30am on Wednesday 04 August 2021 using Microsoft Teams.

Present:

Non-Executive Board Members: Mr J. Connaghan (Chair); Mr M. Hill (Vice-Chair); Mr M. Connor; Dr P. Donald; Cllr G. Gordon; Ms C. Hirst; Mr A. McCann; Mr P. Murray; Mr W. McQueen; Cllr D. Milligan; Dr R. Williams; Ms K. Kasper; Cllr S. Akhtar and Mr T. Waterson.

Executive Board Members: Mr C. Campbell (Chief Executive); Miss T. Gillies (Executive Medical Director); Mrs S. Goldsmith (Director of Finance); Prof. A. McMahon (Executive Director, Nursing, Midwifery & AHPs – Executive Lead REAS & Prison Healthcare) and Ms D. Milne (Director of Public Health and Health Policy).

In Attendance: Mrs J. Campbell (Chief Officer, Acute Services); Mr C. Briggs (Director of Strategic Planning); Dr J. Long (Director of Primary Care); Ms A. White (Chief Officer, West Lothian HSCP); Ms A. Macdonald (Chief Officer, East Lothian HSCP) and Ms M. Simpson (Integration Manager, Midlothian HSCP); Mrs R. Kelly, Deputy Director of HR, NHS Lothian (deputising for Mrs J. Butler); Ms W. Macmillan (Business Manager, Executive Office, NHS Lothian)(Item 45); Ms S. Dillon, Clinical Nurse Manager, NHS Lothian (shadowing Prof. McMahon); Ms K. Taylor, Communications Manager, NHS Lothian; Mr A. Payne (Head of Corporate Governance) and Mr C. Graham (Secretariat Manager).

Apologies for absence: Cllr J. McGinty; Miss F. Ireland; Mr J. Encombe; Prof. S. Chandran; Mr J. Crombie (Deputy Chief Executive); Mrs J. Butler (Director of HR & OD); Mr P. Lock (Director of Improvement) and Mrs J. Mackay (Director of Communications & Public Engagement);

39. Declaration of Financial and Non-Financial Interest

- 39.1 The Chair reminded members that they should declare any financial and non-financial interests they had in the items of business for consideration, identifying the relevant agenda item and the nature of their interest. There were no interests declared.

40. Chair's Introductory Comments

- 40.1 The Chair welcomed members and guests to his first Board meeting and paid tribute to the work of Esther Robertson and Martin Hill during their periods as Interim Chairs of the Board.
- 40.2 The Chair also expressed gratitude for the work and contributions of staff undertaken during the ongoing pandemic which had gone beyond all expectations.

Items for Approval

41. The Chair reminded those present that the Board agenda was made up of two separate sections. The first was the section for approval commonly referred to as “the consent agenda”. The Chair reminded members that they had the opportunity to advise in advance if they wished matters to be moved out of this section. There had been no such requests.
- 41.1 Minutes of Previous Board Meeting held on 23 June 2021 – Minutes were approved with the following amendment:
- Re-appointment of Dr Jon Turvill was as non-voting member of the East Lothian Integration Joint Board for the period from 27 June 2021 to 26 June 2024 - not Edinburgh Integration Joint Board.
- 41.2 Audit & Risk Committee Minutes – 26 April 2021 – Minutes were noted.
- 41.3 Finance & Resources Committee Minutes – 02 June 2021 – Minutes were noted.
- 41.4 Healthcare Governance Committee Minutes – 25 May 2021 – Minutes were noted.
- 41.5 Staff Governance Committee Minutes – 26 May 2021 – Minutes were noted.
- 41.6 Edinburgh Integration Joint Board Minutes – 24 March and 27 April 2021 – Minutes were noted.
- 41.7 West Lothian Integration Joint Board Minutes – 20 April 2021 – Minutes were noted.
- 41.8 Midlothian Integration Joint Board Minutes – 11 March and 08 April 2021 – Minutes were noted.
- 41.9 East Lothian Integration Joint Board Minutes – 25 February and 22 April 2021 – Minutes were noted.
- 41.10 Appointment of Members to Integration Joint Boards – The Board agreed to:
- Re-nominate Dr Richard Williams as a voting member of the Edinburgh Integration Joint Board for the period from 1 August 2021 to 31 July 2022.
 - Appoint Dr Claire Mackintosh as the ‘registered medical practitioner employed by the health board and not providing primary medical services’ non-voting member of the East Lothian Integration Joint Board for the period from 23 August 2021 to 22 August 2024.
 - Re-appoint Dr Elaine Duncan as the ‘registered medical practitioner whose name is on a list of primary medical services performers’ non-voting member of the West Lothian Integration Joint Board for the period from 21 September 2021 to 20 September 2024.

41.11 Infection Prevention Control Annual Report - The Board agreed to take moderate assurance from the information provided in the paper in relation to performance against measured standards and also:

- Noted and accepted the infection Prevention and Control Team Annual Report 2020- 2021 which had been tabled for discussion at the Healthcare Governance Committee on the 27 July 2021.
- Accepted the progress against local delivery plan standards for the year 1st April 2020 - 31st March 2021. Interim performance standards for *Staphylococcus aureus* Bacteraemia (SAB); *Clostridioides difficile* Infection (CDI) and *Escherichia coli* Bacteraemia (ECB) have not been met.
- Noted that infection rates are calculated using total occupied bed days as the denominator. Due to COVID-19 NHS Lothian has seen a drop in total occupied bed days for 2020/21 compared to previous years. Infection rates for 2020/21 should be viewed in the context of fluctuating overall activity associated with COVID-19.
- Noted the positive progress made to develop and improve resilience within the Infection Prevention and Control Service since January 2021.
- Accepted the impact on Infection Prevention and Control Services planned work programme and capacity associated with the ongoing COVID-19 pandemic, and noted the continued delivery of focused audit, education & training and incident investigation over this time.
- Noted the support provided by the Infection Prevention and Control team across a wide range of diverse capital and other built environment projects.
- Acknowledged that mandatory surgical site infection surveillance programmes remain on pause until further notice.

Items for Discussion

42. Board Chair's Report – August 2021

- 42.1 The Chair reported that he had only been in post for a short time but had been meeting with Non-Executive and Executive Directors as part of his induction.
- 42.2 The Vice Chair provided feedback from a meeting on 16 July 2021 with the Cabinet Secretary, which some of the Executive Directors and the Chair had also attended. The meeting had largely focussed on updating the Cabinet Secretary on increasing system pressures but had also covered the review of the policy around self-isolation for staff and the financial impact on NHS Boards as a consequence of the previous pay settlement not being fully funded.

43. Board Executive Team Report – August 2021

43.1 The Board received the Board Executive Team report and there was discussion on the following topics:

- **Appointment of Chair** – The Chief Executive thanked Esther Robertson for her work as the Interim Chair since 10 February 2020 until 30 June 2021 and also thanked Martin Hill for standing in as Interim Chair between 30 June and 1 August 2021.
- **NRAC (National Resource Allocation Committee)** - The Board noted that for 21/22, NHS Lothian remained behind NRAC parity by 0.8%, equating to a value of circa £14m. Discussions with Scottish Government remained ongoing.
- **Scottish Hospitals Inquiry** - The Board noted that the hearings scheduled for May 2022 would be focussed on ventilation. There would be a briefing at the next Finance and Resources Committee and Mrs Goldsmith would bring an update to the October Board meeting.
- **Chief Officer Acute Services** – Mrs Campbell recorded her thanks to Joan Donnelly, Service Director for Outpatients & Associated Services, who would be retiring from the health service today after 42 years of service.
- **NHS Lothian Remuneration Committee** - Dr Williams reported on the recent, well received Remuneration Committee Development Session. The session had been for new and current members and had been excellent. Mrs Kelly agreed to look to arrange a similar session for Board Appeal Hearings and would pick up these arrangements with the Non-Executive Directors.
- **National Treatment Centre** – There was discussion on taking learning from the RHCYP/DCN build into the National Treatment Centre work, the assurance arrangements at the finalising specification stage and the governance arrangements at board and committee level. Mrs Goldsmith confirmed that the infrastructure and internal assurance processes would be worked through and it was clear that there would have to be a delivery team with a project director and a capital planning route to the responsible officer. Consideration would also be given to what the processes would be for NHS Lothian and NHS Scotland Assure.
- **Covid Vaccination Plans for 16-17-year olds** – The Board welcomed the recent announcement that these vaccinations would be rolled out in Lothian. Ms Milne agreed to share a report with Board members on vaccinations for 16-17-year olds and would also bring an update on booster vaccinations to the October board meeting. The Board noted that NHS Lothian were trying to reach as many people as possible just now for vaccinations through community initiatives and ideas such as vaccination buses.

- **Integration Joint Boards: Review of Schemes of Establishment** - Mr Briggs confirmed that the review of the schemes was now underway having been postponed last year due to the pandemic. The reviews could be as broad or as narrow as the Integration Joint Boards decide and it was noted that a Joint Officers Oversight Group had been established. The four Integration Joint Boards in the Lothians were working together to tidy up and edit the schemes which included a lot of out-dated language. The work should be completed in time to bring this back to the October board meeting. Mr Briggs would also further brief members offline if this would be helpful.
- **Consultant Job Planning and addressing backlog due to the Pandemic** – There was discussion on the backlog in hospital procedures due to Covid and the flexibility within job planning. The Board noted that planning is normally done a year in advance and aligned to the planned activity. It was recognised that in 2020/21 there had been a large number of changes to job plans because of Covid and the need for staff to have flexibility towards direct clinical care, moving sessions to deal with greater backlogs and delivering at service level. Mr Murray asked if there would be changes in how job planning took place in future due to the previously required flexibility. Miss Gillies emphasised that staff gave up adhering to normal rules in relation to job planning, often changing job plans with only a couple of hours notice as opposed to the usual three months. This flexibility could not be expected forever and there was a need for outpatients and theatres to go through a recognisable process so other staff can be aligned to support sessions within job plans.
- **Flu/Covid Vaccination Boosters** - Professor McMahon reported that the first programme board meeting had taken place on 03 August 2021. Capacity around this programme was important and each of the four HSCPs had been asked to identify this. The Board noted that at paper around costs had been taken to the NHS Lothian Corporate Management Team and submitted to the Scottish Government. There were additional posts going out to advertisement next week, there was an issue around vaccinators as with the Covid vaccination programme two-thirds of vaccinators had been voluntary. Healthcare Support Workers were being trained up to plug gaps but were unable to take consent so a significant registered nursing workforce was still required. The plans for the Flu/Covid vaccination boosters were due to go live from 06 September 2021.

44. Opportunity for committee chairs or IJB leads to highlight material items for awareness

44.1 Finance and Resources Committee - The Vice Chair highlighted the following issues from the meeting held on 14 July 2021:

- **Reprovision of Eye Services** – Noted that the Outline Business Case had been resubmitted to the Scottish Government Capital Investment Group and that the Full Business Case would come via Finance and Resources Committee to the Board for approval.
- **Carbon Reinvestment Fund** – building enthusiasm of staff to undertake

projects that will deliver financial and carbon savings.

- **Pay Costs** – The Board noted that given the size of the opening financial deficit this year, the structural consequence of the previous pay deal had not yet been funded and representations were being made to Scottish Government to review the position on that.

44.2 **Alignment of Committees, Exchanges of Information and Assurances on Risk** - The Board noted that the Chairs of the Healthcare Governance and Staff Governance Committees had started useful conversations on the alignment of NHS Lothian committees, information and risk routes through the organisation and the work of the Integration Joint Boards. The Chair added that in initial meetings with Non-Executive Directors areas where risk may be uncovered, duplication and accountability had been raised and he would take this forward with committee chairs.

44.3 **Healthcare Governance Committee** – The Board noted that an emerging issue being flagged at the committee had been around the Corporate Risk relating to the impact of staffing pressures. There was also a healthcare governance workshop planned for October 2021 to look at the governance framework within which the committee operates and the linkages with other Board Governance committees.

45. NHS Lothian Board Performance Paper

45.1 Ms Macmillan introduced the report recommending that the Board discuss and review the current performance position of key metrics relevant to the Lothian Performance Recovery Programme and Remobilisation Plans.

45.2 The Board noted that demand within unscheduled care services was returning to pre-Covid levels and flow plans were under development to maximise capacity and address backlogs. Performance trajectories had also been refreshed as part of Remobilisation Plan 4. An increase back to pre-Covid levels was also being seen with outpatient waiting lists with a number of patients waiting over 12 weeks.

45.3 The Board discussed urgent suspicion of cancer referrals, the focus on 52-week long waits, the increasing delayed discharge position, the CAMHS and Psychological Therapies performance, the scheduling of unscheduled care, the long standing pressures within urology, theatre access, Computed Tomography (CT) scanning, Oral Health Services, clinical prioritisation and the opportunities for innovation and redesign of urgent care. It was noted that there was active monitoring on these areas through the Corporate Management Team and the Board's Gold Command Group. There would also be more detailed discussion at the Board's Planning, Performance and Development Committee.

45.4 The Chair added that it was important to work smarter, not harder and to get best value and assurances around new capital developments. It would be useful for the Board to receive a briefing on operating models for new facilities at a future meeting.

45.5 The Board agreed the recommendations within the report:

- To acknowledge the supporting performance infrastructure in place which provides formal assurance on a wider set of metrics aligned to Board priorities through existing committees.
- To recognise the performance challenges detailed in this paper including; exacerbated pre-existing performance issues and dips in performance following the impact of Covid-19 and current measures.
- To consider the clinical reprioritisation exercise undertaken on all inpatient and day case waiting list patients and the focus on maintaining and improving performance in order of clinical priority and longest routine waits.
- To agree that if further deeper dives are requested by the Board, these are addressed in separate reports to maintain the structure of the core performance report.

46. June 2021 Financial Position

- 46.1 Mrs Goldsmith provided an update to the Board on the financial position at Period 3 for NHS Lothian. The paper also set out the financial impact from Covid-19 to date and provided an update on the Scottish Government allocation for this year.
- 46.2 The Board noted that there was now a well-established process around reporting on Covid related costs both locally and nationally. There was discussion on the board's core position which had slightly improved from the financial plan, the Covid/flu vaccination programme which would mean significant service delivery, the three-pronged approach to planning for efficiencies as agreed by the Corporate Management Team and the planning around pay uplifts.
- 46.3 Mrs Goldsmith explained that limited assurance around breakeven was being sought at this stage but this would likely move to moderate assurance after the Quarter 1 reviews had been completed.
- 46.4 There was also discussion on the link between the financial position paper and the corporate risk register, with the risk here relating to the scale of quality reduction in the Board's services and the Board being unable to respond to service requirements due to financial pressures and the substantial challenge around achieving efficiencies. The Chief Executive explained that this also related to the points around NRAC in the Board Executive Team report. It was important that the Board balanced staff, clinical and financial governance and greater funding meant more staff and services. It was recognised that it was not easy to capture all financial pressures into a strategy for a sustainable system.
- 46.5 Mr Briggs added that 3-5-year strategies for areas such as mental health, scheduled and unscheduled care were in development and the draft plans would be costed at the end of this month. These plans focused on delivery of services, appropriateness of bed bases and workforce and financial best- and worst-case scenario elements for the next 5 years.

46.6 The Board noted that other health boards routinely overspend at the end of the financial year which was not something that NHS Lothian had done. It was acknowledged that there was a pressure around prescribing and drug costs. Mrs Goldsmith confirmed that there was ongoing work with pharmacy, acute and primary care colleagues around this. The main pressure this year was acute drugs, largely cancer but there was a challenging cancer backlog to be addressed.

46.7 The Board accepted the recommendations that based on information available at this stage, NHS Lothian is only able to provide limited assurance on its ability to deliver a breakeven position in 2021/22, based on assumptions around additional funding.

47. Corporate Risk Register

47.1 Miss Gillies introduced the report reviewing NHS Lothian's Corporate Risk Register and associated processes to ensure these remains fit for purpose.

47.2 The Board agreed to the recommendations in the paper to:

- Note the Board approved in June 2021 a number of new and revised corporate risks as part of the risk register review.
- Note that the GP Sustainability and Violence & Aggression risks had been reviewed and presented to the Corporate Management Team on 03 August 2021 and these would come to the Board in October 2021, which would complete the review process.
- Note a new process had been established to review all corporate risks with executive leads prior to Corporate Management Team discussions and Board recommendations.
- Note the Audit & Risk Committee in June 2021 accepted moderate assurance regarding NHS Lothian's risk management system.

48. Any Other Business

48.1 Drug Related Deaths - The Vice Chair raised drug related deaths as a matter of huge public debate. The Board noted that there had been an annual report and discussion on drug related deaths at the Healthcare Governance Committee and noted the recent ministerial appointment. This was a significant issue of inequality in Scotland and a public health priority. The Board requested that a briefing paper be produced for the October Board meeting. Ms Milne would take this forward with HSCP colleagues.

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49. Reflections on the Meeting

49.1 The Chair thanked colleagues for the questions asked and participation in discussions.

50. Next Board Meeting

50.1 The next Board meeting would be held on 06 October 2021.

51. Standing Order 5.23 Resolutions to take Items in Closed Session

- 51.1 The Board agreed to invoke Standing Order 5.23 to allow a meeting of Lothian NHS Board to be held in Private. The reason for this was due to the commercial and confidential nature of the business to be discussed.

Chair's Signature MARTIN HILL, Original held on file

Date 06-10-2021

MARTIN HILL
Vice Chair – Lothian NHS Board